

Business Certificate

	IDENTIFICATION:	
DRATED 18	APPROVED:	
	EXPIRES.	
	BUSINESS CERTIFICATE #:	
NEW: R	ENEWAL OF # Vol P	⁰ g
	COMMONWEALTH OF M CITY OF GLOUC	
Date:		
In conformity wit	h the provisions of Chapter 110, Section by declare(s) that a business under the titl	
		is conducted at
		Street, GLOUCESTER, MA 01930
State DOR require	es you to provide either a Fed. ID#	or your SS #
	named persons: YPE FULL NAME	RESIDENCE
SIGNATURE		SIGNATURE
SIGNATURE		SIGNATURE
	THE COMMONWEALTH OF M	MASSACHUSETTS
	SS	20
PERSONALLY APP	EARED BEFORE ME THE ABOVE NAMED	
AND MADE AN OA	T THAT THE FOREGOING STATEMENT IS T	RUE.
		NOTARY PUBLIC
(seal)	M G	
	My Commission F	expires: